Filed 05/02/07 Entered 05/02/07 13:41:38 Desc ss Case 07-08022 Doc 1-1 statement Page 1 of 1 Form B 21 Official Form 21

(12/03)

Form 21. STATEMENT OF SOCIAL SECURITY NUMBER

UNITED STATES BANKRUPTCY COURT Central District of Illinois

Address 4800 S. Chicago Beach Chicago, IL 60615 Employer's Tax Identification (EIN) No(s). [if any]:		Signature of Debtor	Date
Address 4800 S. Chicago Beach Chicago, IL 60615 Case No. Chapter 13		χ s/ Reuben Harold Smith	5/2/2007
Address		I declare under penalty of perjury that the foregoing is tru	e and correct.
Address Address 4800 S. Chicago Beach Chicago, IL 60615 Chapter 13 Employer's Tax Identification (EIN) No(s). [if any]: Case No.		☐ Joint Debtor does not have a Social Security Number	er.
Address 4800 S. Chicago Beach Chicago, IL 60615 Employer's Tax Identification (EIN) No(s). [if any]: Chapter 13 Chapter 14 Chapter 15 Chapter 16 Chapter 17 Chapter 18 Chapter 18 Chapter 19 Chapt		(if more than one, state all.)	
Address 4800 S. Chicago Beach Chicago, IL 60615 Employer's Tax Identification (EIN) No(s). [if any]: Last four digits of Social Security No(s).: [if any] STATEMENT OF SOCIAL SECURITY NUMBER(S) 1. Name of Debtor (enter Last, First, Middle): Smith, Reuben, Harold (Check the appropriate box and, if applicable, provide the required information.) Debtor has a Social Security Number and it is:354620385 (if more than one, state all.) Debtor does not have a Social Security Number. 2. Name of Joint Debtor (enter Last, First, Middle):		☐ Joint Debtor has a Social Security Number and it is	:
Address 4800 S. Chicago Beach Chicago, IL 60615 Employer's Tax Identification (EIN) No(s). [if any]: Last four digits of Social Security No(s).: [if any] STATEMENT OF SOCIAL SECURITY NUMBER(S) 1. Name of Debtor (enter Last, First, Middle): Smith, Reuben, Harold (Check the appropriate box and, if applicable, provide the required information.) Debtor has a Social Security Number and it is:354620385 (if more than one, state all.) Debtor does not have a Social Security Number.		· · · · · · · · · · · · · · · · · · ·	e required information.)
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Reuben Harold Smith, Debtor Address Address A800 S. Chicago Beach Chicago, IL 60615 Chapter 13 Employer's Tax Identification (EIN) No(s). [if any]: Last four digits of Social Security No(s).: [if any] STATEMENT OF SOCIAL SECURITY NUMBER(S) 1. Name of Debtor (enter Last, First, Middle): Smith, Reuben, Harold (Check the appropriate box and, if applicable, provide the required information.) Debtor has a Social Security Number and it is:354620385			
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